



## **EXISTING OFFICE SPACE UTILIZATION QUESTIONNAIRE**

### **A. AGENCY INFORMATION**

Agency Name: \_\_\_\_\_  
Agency Contact Name: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
Agency/Division Program Contact Name: \_\_\_\_\_  
Agency/Division Finance Contact Name: \_\_\_\_\_

### **B. DIVISION / OFFICE INFORMATION**

I. Division/Office Name: \_\_\_\_\_  
Current Address/Location: \_\_\_\_\_  
Local Office Contact Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_  
Email address: \_\_\_\_\_  
Currently in (check one):      State Owned Space ☐      Leased Space ☐      Lease # \_\_\_\_\_

#### **II. Attachments:**

1. Please attach a CURRENT ORGANIZATIONAL CHART including STAFF BY POSITION for Division/Office.
2. Please attach a CURRENT PLAN of the office if available. If no plan is available, please contact the State Property Commission staff.
3. Please attach current Agency Specifications if available.

#### **III. Please briefly summarize any changes in or program requirements of the existing Division / Office.**

---

---

---

---

---

## C. CURRENT STAFF SPACE INVENTORY

Using the chart below, list the current number of positions and projected growth positions, if any, in each category. Please do not include any shared workspaces in the chart below.

### DEDICATED IN OFFICE WORK SPACES:

Title / Function	Type	Allocated SF	Current	Projected
Executive Director, Commissioner, Agency Head	Office	220		
Deputy Exec. Dir., Deputy Commissioner, Division Dir., Regional Dir., Local Manager	Office	120		
Professional (working primarily with confidential health information – prior SPC approval required)	Small office	90 – 100		
Manager, Supervisor, Coordinator (5 or more direct reports)	Workstation	64 (8x8)		
Professional Staff, Administrative, Tech	Workstation	49 (7x7)		
Call Center	Workstation	20 (5x4)		
Total				

### SHARED IN-OFFICE WORKSPACES

Does the Division / Local Office have positions that will share workspaces?

Yes ☐ No ☐

If “Yes”, please use the chart below:

Title / Function	Type (Office / Workstation)	Number of Staff	Number of Work Spaces Needed

Total

--	--

Using the Total Number of Staff from the Dedicated chart above, indicate the number of employees:

Male: \_\_\_\_\_

Female: \_\_\_\_\_

#### D. ANCILLARY/SUPPORT AREAS

Room Description	Current Size(s) / capacity	Comments
Reception area		
Conference room		
Huddle room (2 – 4 people)		
Break room		
File room		
Storage room		
Open collaboration area		
Other specialty room		

Other Comments: